PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN	
TOTAL CLAIMS			5-46		Carlotte Control		J	RATE	FEE	ſ	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			5 ¹ minus 20=		• 34			X\$ 9=	306	OR	X\$18=	
INDEPENDENT CLAIMS			€ min	us 3 =	3			X40=	120	OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT		Ø			+135=	135-02	li	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							١	TOTAL	914	OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)	(Column 2) HIGHEST			(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=`	
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	TCLAIM			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								AUUII. FEE				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL 411	=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	I CLAIM]	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			umn 2)	(Column 3)	_					
AMENDMENT C	Mark State	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER YIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=]	X40=		OR	X80=	1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						_	<u> </u>		┨ [∪] ⊓		1
	If the enter in sele	ımın 1 in laan thee	the entry in eat	ımn O um	ite "O" in c	olumn 3		+135=		OR		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											